

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

BEN LEMING FOR CONGRESS

Full Name (Last, First, Middle Initial)

A.

Date of Disbursement

ASSOCIATES 100

10'14'2010

Mailing Address

1302 MEMORIAL DR

City

State

Zip Code

MURFREESBORO TN 37130

Purpose of Disbursement

HEADQUARTERS RENTAL

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

, 650.00

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

ASSOCIATES 100

10'15'2010

Mailing Address

1302 MEMORIAL DR

City

State

Zip Code

MURFREESBORO TN 37130

Purpose of Disbursement

HEADQUARTERS RENTAL

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

, 650.00

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

MEREDITH, RICK

10'15'2010

Mailing Address

927 S WASHINGTON AVE

City

State

Zip Code

PARK RIDGE IL 60068

Purpose of Disbursement

COMMERCIAL PRODUCTION

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

, 1,000.00

SUBTOTAL of Disbursements This Page (optional).....

, 2,300.00

TOTAL This Period (last page this line number only).....

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